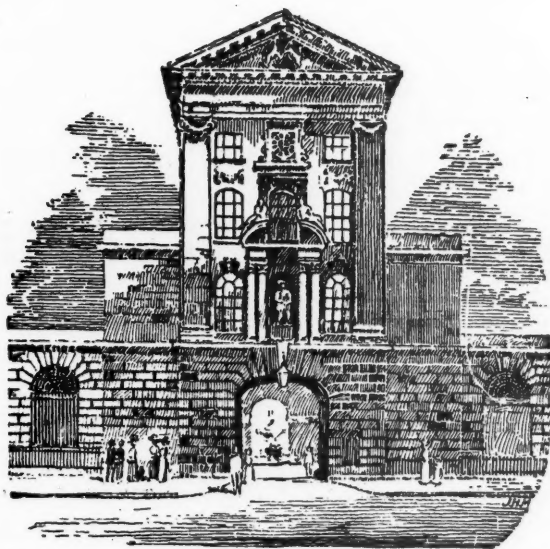


ST BARTHOLOMEW'S HOSPITAL JOURNAL



VOL. XXXIV.—No. 5.

FEBRUARY, 1927.

[PRICE NINEPENCE.]

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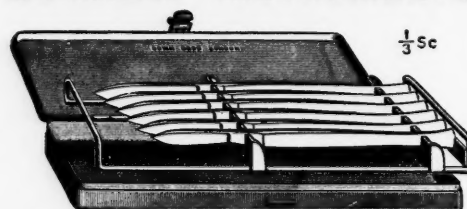
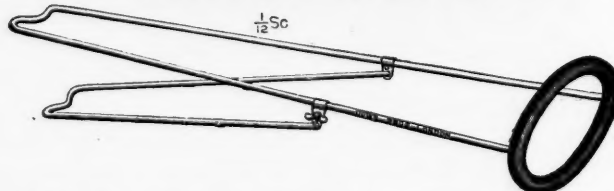
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"Æquam memento rebus in arduis
Servare mentem."
—Horace, Book ii, Ode iii.

JOURNAL.

VOL. XXXIV.—No. 5.]

FEBRUARY 1ST, 1927.

PRICE NINEPENCE.

CALENDAR.

- Tues., Feb. 1.—Dr. Langdon Brown and Sir C. Gordon-Watson on duty.
- Wed., " 2.—Surgery. Clinical Lecture by Mr. McAdam Eccles.
- Fri., " 4.—Prof. Fraser and Prof. Gask on duty. Medicine. Clinical Lecture by Dr. Morley Fletcher.
- Sat., " 5.—Rugby Match v. Devonport Services. Away. Hockey Match v. Shoburness Garrison. Away. Association Match v. Clare College, Cambridge. Home.
- Mon., " 7.—Special Subject Lecture by Mr. Rose.
- Tues., " 8.—Dr. Morley Fletcher and Sir Holburt Waring on duty.
- Wed., " 9.—Surgery. Clinical Lecture by Mr. L. B. Rawling. Association Match v. Wye College. Away.
- Students' Union Dance. Savoy Hotel.**
- Fri., " 11.—Sir Percival Hartley and Mr. McAdam Eccles on duty. Medicine. Clinical Lecture by Sir Thomas Horder.
- Sat., " 12.—Rugby Match v. Glamorgan Wanderers. Home. Hockey Match v. R.M.C., Sandhurst. Away. Association Match v. Old Malvernians. Home.
- Mon., " 14.—Special Subject Lecture by Mr. Elmslie.
- Tues., " 15.—Sir Thomas Horder and Mr. L. B. Rawling on duty.
- Wed., " 16.—Surgery. Clinical Lecture by Mr. L. B. Rawling.
- Thurs., " 17.—Association Match v. Keble College, Oxford. Away.
- Fri., " 18.—Dr. Langdon Brown and Sir C. Gordon-Watson on duty. Medicine. Clinical Lecture by Sir Thomas Horder.
- Sat., " 19.—Rugby Match v. O.M.Ts. Home. Hockey Match v. Old Uppinghamians. Home. Association Match v. St. John's College, Oxford. Away.
- Mon., " 21.—Special Subject Lecture by Mr. Scott.
- Tues., " 22.—Prof. Fraser and Prof. Gask on duty.
- Last day for receiving matter for the March issue of the Journal.**
- Wed., " 23.—Surgery. Clinical Lecture by Sir C. Gordon-Watson.
- Fri., " 25.—Dr. Morley Fletcher and Sir Holburt Waring on duty. Medicine. Clinical Lecture by Sir Percival Hartley.
- Sat., " 26.—Rugby Match v. Northampton. Away. Hockey Match v. Mill Hill School. Away. Association Match v. Old Bancroftians. Home.
- Mon., " 28.—Special Subject Lecture by Mr. Rose.

EDITORIAL.

SO "Cancer Research" is to be yet another season's shibboleth. Sir Berkeley Moynihan, in his recent lecture to the British Medical Association on "Cancer and Its Control," emphasized three things: The unique rise in the death-rate from cancer as against the fall in that from tuberculosis; the danger of being "treated" by quacks; and the difficulty of talking about early symptoms in front of a mixed lay audience. A substantial part of the Press became romantic over the change of publicity tactics shown by the B.M.A. in inviting newspaper patronage for this lecture, though they admitted that Sir Berkeley stood in "no more need of advertisement than does Westminster Abbey." Yet when it comes to his remedy—the spreading of the knowledge of those early symptoms—we fear it will still be a case for the average Doctor of the Goatherd in *Theocritus*: "No, no, man; there's no piping for me at high noon. I go in too great dread of Pan for that."

Another—the laboratory—aspect of the movement was thoroughly dealt with by Prof. Blair Bell in an address to the Abernethian Society, the first part of which we print on p. 77; and the following account from Dr. Donaldson shows that this Hospital is not to be behind the times:

"It is with very great pleasure that we are able to announce that the College has recently received a grant of £1000 per annum from the British Empire Cancer Campaign for an investigation into the treatment of cancer by means of lead.

"No one who heard Prof. Blair Bell at his recent address to the Abernethian Society could have failed to be impressed by the results so far obtained by this new form of treatment. It is not claimed that lead

constitutes a cure for every case of cancer; such an idea could not for one moment be entertained; but there is no question but that in certain cases it exerts a profound influence on the course of a malignant new growth, even leading to its complete disappearance, and in a few instances there has been no recurrence after a period of several years. This fact alone is sufficient reason for further investigation on an extensive scale. A Committee has been formed, consisting of various members of the Staff, and it is understood that Mr. J. B. Hume will act as part-time officer. It is hoped that a certain number of beds will be promised by several members of the Staff, and that room will be made in the Pathological Department for the scientific side of the work under the supervision of Dr. R. G. Canti.

"We wish the research every success."

* * *

STRANGWAYS MEMORIAL.

Dr. T. S. P. Strangeways, whose premature death occurred recently, has left a widow and seven children, the five youngest of whom are still being educated. It is known to many of his friends that any part of his income which was not required for household expenses was habitually used by him to assist the Research Hospital. The immediate needs of the family have been met by subscriptions from friends in Cambridge, but a large sum will be required to complete the education of his sons, the eldest of whom is in his second year at Trinity Hall. During the last thirty years many Cambridge medical men have been taught by Strangeways the essentials of pathology, and may feel that this is an opportunity of expressing their appreciation of these services, of his additions to medical knowledge and of his scientific work.

Cheques should be drawn to Lloyds Bank, Cambridge, and crossed "c.a. Strangeways Memorial Fund." They may be sent to the Manager of the Bank, G. F. C. Gill, Esq., who has kindly consented to take charge of the account, or to Sir Humphry Rolleston, Southfield, Cambridge, or to Prof. H. R. Dean, Dr. M. Donaldson, Dr. G. P. Bidder, Dr. L. E. Shore, or Dr. Cobbett.

There will be a meeting at the Royal Society of Medicine on Wednesday, February 2nd, at 5 p.m., and all those who sympathize with the above appeal are invited to be present.

* * *

Do not forget to come to the Dance at the Savoy Hotel on Wednesday, February 9th, from 9.30 p.m. to 2.30 a.m. Tickets are going rapidly, so don't find yourselves left in the outer darkness.

The project for completing the restoration of the five bays of the East Cloister of St. Bartholomew-the-Great requires an outlay of £2400—surely not a great deal to spend on one of the finest old churches in London. Cheques should be sent to the Rev. W. F. G. Sandwith, M.A., The Vestry, St. Bartholomew-the-Great, West Smithfield, E.C. 1.

* * *

We have received the following letter and appeal:

DEAR SIR,—As Honorary Local Secretaries of Epsom College at Bart.'s we have received a letter from Dr. Raymond Crawford, making a special appeal for funds for the building of a Sanatorium and Isolation Block at Epsom College. Would you publish this appeal in the forthcoming number of the JOURNAL?

Yours faithfully,

(Signed) GEOFFREY EVANS.

GEO. E. GASK.

* * *

EPSOM COLLEGE.

The Council of Epsom College have embarked on a project for the building of a model School Sanatorium and Isolation Block in place of the antiquated buildings which at present serve these purposes. The scheme will cost some £25,000, viz. £15,000 for the main sanatorium, accommodating 20 patients, and £10,000 for the Isolation Block, accommodating 40 patients. This is a large sum of money to raise and, to stimulate giving, the Council have decided to allow a donor of £10,000 to name the main sanatorium, of £5,000 the Isolation Block, of £3,000 a large ward, of £1,000 a small ward, and of £100 a single bed.

In the hope that all men in the profession will help, the Council have sent out an appeal to the Medical Schools of every hospital, and it is with the object of making this appeal more widely known that the Honorary Local Secretaries of Epsom College at Bart.'s have asked us to publish this information in the JOURNAL. The Council hope that each medical school may be able to raise a sufficient sum of money to name a single bed. Subscriptions may be sent addressed to the Honorary Local Secretaries of Epsom College, c/o The JOURNAL, St. Bartholomew's Hospital, London, E.C. 1.

A famous Oxonian scion
Considers the hydrogen ion
The primary source
Of electrical force,
Is an ion too small to rely on?

C. F. O. W.

THE NEW MATRON.

THE election of a new Matron in the place of Miss McIntosh, who has resigned after so many years of good work, has been an outstanding event in the first month of 1927.

The advertisement of the vacant post brought a considerable number of most suitable candidates into the field.

The Election Committee most carefully scrutinized the claims of each one, and made a selection of six who were to be interviewed. Among these were two who had not received their training at St. Bartholomew's—both excellent women. Unfortunately neither was able to attend owing to the fact that they were both applying for another matronship—and the same one—at the same time, and had to be interviewed on the same day elsewhere.

This left four St. Bartholomew's nurses. Needless to say, the Election Committee, which was held on January 25th and was very fully attended, had some real difficulty with such obvious merit before them in making a decision. Necessarily three had to be disappointed, and to them we give our good wishes for continued excellent service in the posts they now hold.

Our new Matron is Miss Helen Dey, R.R.C., and to her we extend a very warm welcome, as she comes back—may we say—to her old Hospital and home, assured she will receive from all good wishes for her work in such a responsible office.

Miss Dey began her training at St. Bartholomew's in November, 1909, and after obtaining her certificate she acted as a nurse in the Theatre for a year. When the Great War broke out she was in Q.A.I.M. Nursing Service Reserve, two years later being transferred to the regular service, being in France in all from August 16th, 1914, to March 23rd, 1919. She was mentioned in despatches and received the R.R.C., 1st class. Later she saw active service in Ireland, until truce was signed.

In 1921 she went over to the United States, and was occupied in a considerable amount of nursing work, superintendence and other duties, which gave her an insight into the training and daily life of nurses in that great English-speaking nation. In consequence of all this experience she was appointed in October, 1925, to the coveted post of Assistant Matron to the Leeds General Infirmary, the home of so much that is good in surgery and in nursing.

Her excellent work, her wide outlook, her organizing ability and her loyalty to her *alma mater* have rightly now been crowned by her appointment to the premier position of Matron and Superintendent of Nursing at St. Bartholomew's Hospital. Long may she enjoy good health to fulfil the onerous but delightful duties of the office.

W. McA. E.

OBITUARIES.

T. S. P. STRANGEWAYS, M.A.(HON.)CANTAB.,
M.R.C.S., L.R.C.P.,

Huddersfield Lecturer in Special Pathology, University of Cambridge; Director of the Cambridge Research Hospital.

IT is with deep regret that we record the death of Dr. Strangeways Pigg Strangeways, which occurred at Cambridge on December 23rd, 1926.

In 1890 he entered St. Bartholomew's Hospital as a student, and obtained the Matthews Duncan Gold Medal in 1895. Qualifying in 1896 he came under the influence of Kanthack, who singled him out as a kindred spirit possessing a truly scientific mind and relentlessly seeking after the truth. Shortly afterwards Kanthack left St. Bartholomew's for Cambridge and wrote to Strangeways, asking the latter to join him. This offer Strangeways accepted, giving up his post of Curator of the Museum. Kanthack's opinion is well shown in a letter he wrote to a friend after Strangeways became Demonstrator of Pathology at the University. He says:

"When I undertook my duties here I firmly resolved to acquire his invaluable services for this University as soon as a proper opportunity presented itself. Since his arrival the Pathological Laboratory has made rapid strides, for he is the right man in the right place, and ambitious to see our laboratory take the foremost place . . . he impressed the students with his sterling qualities, which were generally acknowledged, in fact I hear his praises from all sides . . . he is a most conscientious worker, honest and critical, so I value his opinion more than that of any other morbid histologist."

In 1900 he was given the honorary degree of Master of Arts, and in 1905 became Huddersfield Lecturer in Special Pathology. About this time he conceived the idea of instituting a Research Hospital, where the laboratory study of disease could be carried on in the same building which housed the patients. Largely through the generosity of Sir Otto Beit his ideals were realized in 1906 by the opening of the Cambridge Research Hospital, which was moved to a larger building in the Hills Road in 1912.

For fifteen years he worked hard and solidly at the difficult problem of arthritis, working out the cases in his wards, collecting notes of many thousands more, and gathering together a museum of some 2000 arthritic specimens which is second to none. Progress was made, and a classification was built up and some order created out of the tangled mass which had previously existed, but Strangeways realized that in order to gain further insight into the process of inflammation it was necessary to investigate intimately the living cell itself, and thus he took up the study of tissue culture.

This decision was more momentous than was realized at the time, for from then onwards the laboratories of the Research Hospital, which had housed a solitary and sometimes despondent fighter, became transformed into the foremost centre of tissue culture, and attracted scientific men from all parts of the country, the Continent and America. He quickly collected around him a number of keen workers, who, following their own lines of research, were directing their experiments to the same end—the study of life itself.

Of the work recently carried out the following deserves special mention: "The Origin of Bi-nuclear Cells by Mitotic Division"; "The Differentiation of Embryonic Tissue Growing *in Vivo* and *in Vitro*." In this work Strangeways and his colleagues devised a method of growing the early embryonic limb bud in a test-tube. A similar experiment was done with the rudimentary eye, which, in artificial media, developed pigment, rods and cones, ganglion cells, nerve-fibres, pars ciliaris, retinae and lens. "The Effects of Certain Fixatives on Structures within the Cell," beautifully illustrated by dark-ground illumination. Other work was done on the effects of beta, gamma and X-irradiation on the living cell. The actual paper on which he was engaged at the time of his death deals with the causes of death in the embryonic fowl after X-ray irradiation. This work may well prove to be of the greatest value to radiological science. Events during the last five years happened quickly in these laboratories, and Strangeway's imagination and inspiration have instilled far-reaching ideas in the minds of all those who worked with him. His untimely death, therefore, has left a great blank in the Hospital, but his inspiration still lives, and will for ever encourage his colleagues to carry on the work he so dearly loved.

Strangeways was not infrequently to be seen in the Square or Luncheon Room at St. Bartholomew's Hospital. He was engaged in carrying out research of an exact nature on the quantitative effects of X-rays on mitosis in tissue culture. In order to eliminate all possible sources of error due to the elaborate apparatus employed he was actually carrying out the experiments (which lasted over a year or more) in duplicate both at Cambridge and in the Deep X-ray Research Department at St. Bartholomew's. These experiments were carried out at the same time, so that the cultures were of the same batch and of the same age, one set being irradiated at Cambridge and the other in London under identical physical conditions. It is to the credit of his marvellous technique that almost invariably the sister experiments turned out identically alike. It is work such as this, where no trouble for the sake of precision is too great, that brings lasting credit to the worker and the cause for which he works.

We offer our sincere sympathy to his widow with seven children, all but one of whom are under the age of twenty-one.

THOMAS CLAYE SHAW, B.A., M.D.(LOND.), F.R.C.P.,
Emeritus Lecturer on Psychological Medicine,
St. Bartholomew's Hospital.

The death of Dr. Thomas Claye Shaw, in his eighty-sixth year, removes from the medical profession a remarkable personality. Dr. Claye Shaw was educated at King's College, London, where he was Senior Warneford Scholar. He became B.A. of the London University in 1860, M.R.C.S. and L.S.A. in 1864, and M.B. in 1866. He took the degree of M.D. in 1867, qualifying for the gold medal, and in 1880 was elected a Fellow of the Royal College of Physicians. Turning his attention to mental disease, he became Medical Superintendent of the London County Asylum at Banstead, in Surrey. Subsequently he was appointed Lecturer on Psychological Medicine at St. Bartholomew's Hospital, and Lecturer on Clinical Insanity at St. Luke's Hospital in the City.

As a lecturer he was very attractive, and his classes at St. Bartholomew's Hospital were always well attended. He was outspoken, and dogmatic as far as his subject would allow. Those who were at the Hospital in the 'nineties will remember an occasion on which he gave the opening address at the Abernethian Society. He came prepared with an address "for men only." He was startled, but unabashed, at finding a mixed audience of students and nurses.

Most of Dr. Claye Shaw's writings were articles in journals, hospital reports, and medical dictionaries; but he wrote one book—*Ex-Cathedra Essays on Insanity*. In 1913 Dr. Claye Shaw aroused much discussion by an address to a medical audience. He warned the modern woman that her new activities in sport and independence in life would mar the beauty of her face, change her nature, and alienate male sympathy. At the beginning of the war he made a scathing attack on the mentality of the German in general and the Kaiser in particular. In an article on the psychology of sport he displayed his keenness for this form of mental relaxation by advocating the setting up of public memorials to all outstanding figures in the world of sport. He lived in retirement at Cheltenham with his wife, who predeceased him by less than two years. He had two daughters.—
[Abbreviated from the *British Medical Journal*.]

LIEUT.-COLONEL R. F. STANDAGE.

Lieut.-Col. Robert Fraser Standage, C.I.E., late of the Indian Medical Service, while playing bridge at

the East India United Service Club on Saturday afternoon, January 15th, 1927, had a seizure, from which he died a few hours later in a nursing home. Only a few weeks ago he underwent a successful operation for cataract on the left eye.

A son of the late Mr. Alfred Standage, of Hurcott House, Worcestershire, he was born on April 5th, 1868, and was trained at St. Bartholomew's Hospital, where he gained the Bentley Surgical Prize in 1890, being appointed in the following year a house surgeon and physician at the Metropolitan Hospital. He entered the Indian Medical Service in 1894, and in the following year was made M.O. to the 2nd Bombay Lancers (now 32nd Lancers). In 1897 he received the thanks of the Bombay Government for his services on famine duty. He was in the field in the Uganda Mutiny of 1897-9, being mentioned in dispatches and receiving the medal with clasp. After a period of plague duty he went to Bangalore as officiating Residency Surgeon, and two years later was confirmed in the appointment, which he filled with distinction until he retired last year. There came, however, the interlude of the Great War. He was on the Medical Staff in the East Africa Field Force in 1917-19, and saw campaigning in what was formerly German East Africa, as well as Nyasaland and Northern Rhodesia. He was again mentioned in dispatches. In 1922 he was made C.I.E.

Col. Standage was a keen professional man. He contributed many articles on surgical and gynaecological subjects to the *Lancet*, the *British Medical Journal*, the *Journal of the R.A.M.C.* and other medical publications in this country and India. For his help to hospitals in India he was last year appointed an Esquire of the Order of St. John of Jerusalem. He married in 1902 Gwendolen, daughter of the late William Lonsdale, of Hutton Roof, Eastbourne, and the Mysore State. She survives him with an only son.

TEAM-WORK IN RESEARCH.

An Address delivered before the Abernethian Society of St. Bartholomew's Hospital on January 20th, 1927.

By W. BLAIR BELL, B.S., M.D., Hon.F.A.C.S.,
PROFESSOR OF GYNAECOLOGY IN THE UNIVERSITY
OF LIVERPOOL.

INTRODUCTION.

TO-NIGHT it is my great privilege to address the students of Bart.'s—men who in a great measure hold the future of medicine in their keeping. The long line of distinguished physicians and surgeons, including the great Abernethy himself, who have laboured here, make it incumbent on you to maintain the high prestige of St. Bartholomew's. But, also, I have the honour of speaking to the nurses, whose horizon in medical matters is no longer bounded by benevolence and bed-making, poultices and pulse-rates, but extends to tolerance and

efficiency tests and pressure problems. Indeed, I am not sure but that the nurse of to-day is not required to have more than a nodding acquaintance with the functions of the reticulo-endothelial system. And last, because I believe that by the time we ancients come to occupy positions on the staff we are ready to start all over again, it is with the greatest pleasure, although with anxious foreboding, that I pay my tribute to the kindly interest of members of the staff who are here to-night.

My task is no light one, and I have seriously tried to prepare myself for it. Every morning for some weeks, as I have offered first one cheek, then the other, to the tender mercies of Mr. Gillette, I have looked out upon the world through the memorial arch of Bart.'s. It was indeed a happy thought on the part of that disciple of St. Bartholomew who sent the calendar to me, with best wishes that my vision should be correctly aligned.

I have a very interesting subject about which to talk to-night; and although I shall be unable to invest my remarks with the poetic fervour with which Abernethy delivered his discourses, I hope I shall be able to do duty to my text without boring you. I am sure that most of the world is tired of hearing my views on certain subjects; but I, on my part, am very patient and persistent, because I know that people weary soonest of those things which they do not understand.

INDIVIDUAL RESEARCH.

In the days gone by the investigator was an individual who closeted himself in his workroom, unvisited by fellow-workers, existing apart from the world at large. His discoveries were unknown to any for long periods of time, partly owing to his secluded habits, but also because means of communication were slow and haphazard. The alchemist of those days might turn lead into gold without altering the bank-rate or incurring the envy, hatred and malice of his fellow-alchemists.

Now, when the whole world knows at night that Mrs. Thomas, of Tottenham Road, Tooting, was taken ill at 4 p.m., and wishes to see her son—last heard of in Siberia—at once, intercommunication is so easy that news is spread quickly, and often erroneously, by wireless and by the daily papers, and not slowly or always correctly by the scientific press.

As a result, any startling piece of scientific information is within a short time dissected, accepted, disproved or damned, before the originator has finished his sentence. This makes men extremely careful—so careful that the scientific man who says little and does less, but contrives to look like an owl, is held to be a worthy successor to Socrates. Still, after all, it matters not very much what the contemporary world thinks of a man; it matters far more that he be happy in his work, happy in his friends and colleagues, and fortunate in the regard of posterity.

I shall say little of the happiness and thrills that scientific work brings to those who engage in research for the sake of knowledge and for the benefit of humanity. I shall pass lightly over the beauties of inspiration and fulfilment and the emotions of the seeker. I must move on to my main theme, and the illustration of it that I have to offer.

TEAM-WORK IN RESEARCH.

What do we mean by teamwork in research?

In this Hospital you have your various teams, or units as they are sometimes called, at work. These teams include the resident medical officers, students and nurses, as well as the honorary members of the staff. Whether they be professorial units or not matters little. The object of each is to ensure co-operation towards a definite end. The rules are clear-cut: The game must be played in the laboratory, operation theatre and ward, as it is on the football field. Team-work means unselfishness—playing for the side, and not for individual glory; the man who takes up research for personal gain or advancement is not of the slightest value either as a player or referee. Nevertheless, in all teams there is need of a skipper to correlate the efforts of the team, to see that there is efficiency, economy and proper direction of effort; but he must be an unselfish player himself, and have the respect and confidence of his team, otherwise the goal-line will not be reached.

I need hardly tell you that members of the scientific professions are not immune to jealousy, egotism and other deplorable characteristics, so it comes about that, in addition to the possession of tact, a sense of proportion, and above all a sense of humour is necessary for all. Of course this is idealism; I do not pretend that I myself, or any of the members of our team in Liverpool, possesses

all of these virtues. Indeed, for example, I am fortunately provided with a censor of my correspondence which sometimes (in moments of unsought stress, be it said) is used to extinguish the fire. Still, if one knows the essential characteristics necessary, one can always strive to develop them.

The team I have the honour of directing in Liverpool has worked together for five years in spite of the forecasts, the most optimistic of which gave us three months. I readily admit that this says a good deal for the team and very little for the Director; but there it is, and we are all proud of the keenness and spirit of loyalty that exists.

As you probably know, the team is engaged in working out the problem of cancer on the lines laid down; that is to say, every member of the staff has been engaged in attempting to turn our working hypothesis into a generalization, and to adapt the terms of the generalization to the requirements of clinical work in the treatment of this disease.

The staff meets at fairly regular intervals to discuss interim reports issued by the various departments, to consider future researches, and to discuss matters concerning the scientific work of the organization. These meetings are in themselves of very great educative value—especially to the younger men—for they have an opportunity of asking questions and of discussing abstruse matters with the experts in the different branches.

All publications are issued under the name of the head of the department from which they are issued, and the worker, or workers, directly concerned.

Now you will want to know why a team should be necessary when so much has been evolved by men working alone. In surgery, yes, that has gone ahead and surgical technique is dependent on reliable teamwork—not that this is always to be observed; but in research work, you may say, surely it is the individual that counts; it is originality of thought and outlook that matters.

This is, of course, true in a sense; no great theme can be initiated unless there be originality; there must also be the power of appraisal and co-ordination of existing knowledge bearing on the subject. But in great and complex problems such as that of cancer, it is right and proper that it should be attacked from as wide a point of view as possible, but at the same time in a logical and co-ordinated manner.

It appears, however, that in most laboratories in which cancer research is prosecuted the many workers are engaged in following little side-tracks which are too often unrelated one to the other.

About twenty years ago it seemed to me that since the cancer problem had resisted elucidation on the theory of parasitic origin—as might, in my opinion, have been expected—instead of being a simple question it was a large biological problem. It was necessary, therefore, to conceive a working hypothesis with extensive relations on which to commence operations, and then to prosecute the inquiry in every direction, until the theoretical considerations were disproved or converted into a generalization.

This brings me to my own hypothesis and its evolution; you will see that the development of it was quite beyond the capacity—mental or physical—of one man.

WORK OF LIVERPOOL MEDICAL RESEARCH.*

In the investigation of so complex a question as the nature and control of malignant disease, it cannot be denied that the conversion of a working hypothesis, with which the investigator must start, into a definite and substantial generalization by the putting together of existing scientific facts and the elucidation of further evidence, is of vastly greater ultimate importance than the initial attempts at control based on the generalization enunciated. By this I mean that, provided a generalization concerning the true nature of malignant neoplasia can be established beyond question, some control of this disease—limited, perhaps, as I shall explain later—must assuredly follow, if not at the first

attempt, at any rate as the result of subsequent modifications and developments.

It has, therefore, been our chief endeavour to substantiate our hypothesis from every point of view.

I show on the screen a list of the scientific staff of the Liverpool Medical Research Organization. Each group of workers under the branches of science mentioned are working out the problems that come within their scope, and these problems all arise from a common central hypothesis.

HYPOTHESIS.

To us, malignant neoplasia appears to be a reversion of the somatic cell to the early embryonic type which forms the trophoblast. We regard the chorionic epithelium as being a normally malignant tissue that comes under somatic control, as we have described in previous communications. It is malignant in that it is dependent on its own efforts to obtain nourishment for itself, and, indirectly, for the growing embryo.

We believe that if it be possible for a cell to pass through all the phases of undifferentiation to a differentiated state with increasing specialization, as seen in the human embryo, there should be no difficulty in realizing that a differentiated cell is capable, in certain circumstances, of retracing the phases back to undifferentiation. This process is known as dedifferentiation, and it has been definitely shown to occur in normal differentiated cells grown *in vitro*.

Pathologists have long spoken of the undifferentiated cells seen in malignant neoplasia; but, strictly speaking, we should speak rather of the dedifferentiated cells. This dedifferentiation we hold to occur as the result of the action of the innumerable causes—mechanical, bacteriological, radiological, thermic and the rest—all of which lead to a common, pre-cancerous condition of impaired vitality with starvation—possibly oxygen deficiency—in the cell. Whatever the actual metabolic disturbance produced may be, it is evident that the damaged cell, thrown on its own resources, must either recover, die, or develop abnormally in order to provide itself with nutriment. The last condition can only effectually be ensured if the injured cell revert to a trophoblastic type. This is, I believe, a rational explanation, and is what actually occurs. However, as I have said, such a hypothesis must be founded on accepted facts before it can become a generalization on which we can base our methods of control. We have, therefore, sought and found evidence in support of our hypothesis along the following lines: (a) Morphological; (b) constitutional (i) chemical constitution, (ii) physico-chemical state; (c) physiological; (d) pathological; (e) toxicological.

* This portion of the address was illustrated by lantern-slides.

A comparative study on these lines with regard to the similarity of, and differences in, the structure and function of various tissues may be considered reasonably comprehensive.

MORPHOLOGICAL EVIDENCE.

The histological evidence of the structure and mode of progression of malignant cells very strongly supports the view that these cells are of a dedifferentiated type, and that this dedifferentiation of the cell is comparable with its degree of malignancy. Moreover, I must call attention to the fact that in malignant neoplasia there is a tendency to syncytial arrangement on the part of the cells. Pathologists must often have noticed how true this is, not only in carcinoma, but also in sarcoma.

CONSTITUTIONAL EVIDENCE.

Chemical constitution.—Although there are related secondary chemical differences between malignant cells and normal resting tissues, it is the lipin content, especially that of the phosphatides, and the phosphatide-cholesterol ratio that are interesting, for these substances are of primary importance in the constitution of the cell. We have found that the phosphatide content and the phosphatide-cholesterol ratio are much higher in malignant than in normal tissues and benign tumours, and that these figures reach a maximum in the constitution of the chorionic epithelium (Table I).

TABLE I.

Human tissues.	Per cent. water.	Per cent. phosphatides (on dry weight).	Per cent. cholesterol (on dry weight).	Phosphatide-cholesterol ratio.
Normal tissues:				
Ovary	75.8	5.22	2.16	2.4
Cervix	75.15	1.08	0.43	2.5
Innocent neoplasms:				
Ovary	80.9	1.48	0.52	2.8
Malignant neoplasms:				
Cervix	80.8	3.32	0.92	3.6
Ovary	81.9	4.52	1.12	4.0
Chorionic villi	89.9	6.8	1.47	4.7

Physico-chemical state.—With regard to the physico-chemical state of the cell-membrane, it is obvious that permeability is a matter of prime importance; for if a cell be in urgent need of nutriment, permeability may be a deciding factor in the continuance of vitality, as indeed it is an absolute requisite for rapid growth. Now it is interesting that the degree of permeability of the cell membrane is dependent on the phosphatide-cholesterol ratio: a high cholesterol content favours impermeability, whereas a low cholesterol content and a high phosphatide favour permeability, for this ratio is consistent with an oil in water type of emulsion.

(To be concluded.)



"THE NAÏVE CHATTER OF MY NURSE."

DRAMATISTS IN HOSPITAL.—II.

OSCAR Wilde makes Dorian say to Alan Campbell, the chemist in *The Picture of Dorian Gray*: "You go to hospitals and dead houses. If in some hideous dissecting room you found this man lying on a leaden table . . . you would not turn a hair." It was strange that Wilde, a conscientious devotee of his creed—"Art for Art's sake"—should describe such things, and leave no record of personal experience of them. Patient research has revealed, however, a letter, which is here published.

"DEAR ———,

"I am much better. I confess that the *ennui* of convalescence has been relieved by the naïve chatter of my nurse. After hearing of her early training I feel differently toward the class. The uniform (hateful word), at least, is beautiful, like some ample Venetian vase, madly, deliciously and solemnly inverted. It expresses them, for the soft dove-grey of the probationer imparts a gazelle-like grace and innocence, while a subtle infusion of the least revolting of primary colours heralds the growth of disillusionment and responsibility. I have invented this trifle. The matter, I fear, is only from hearsay, and the whole bears the mark of convalescent mind. Aubrey has humoured me by illustrating it"

SCENE: *The kitchen of Yokanaan Ward. Nurses GIRDLE and DOLE and the PROBATIONER at tea.*

TIME: *Just after a change of duty.*

DOLE: Where's Sister?

GIRDLE: Out to tea.

PROBATIONER: Has she gone to see Sister Salome?

DOLE: The idea! They live on the same floor. And why should she?

(Enter Nurse BARCHESTER.)

BARCHESTER (*languidly*): Why does anyone go to tea? (To GIRDLE) Number Six is bad.

DOLE: Men go for food. Women get food for thought and subsequent regurgitation.

BARCHESTER: You really must practise that talk before you do it in public, Doley. If you mean Sister, it's probably about the Scarlet Runner.

PRO. (*timidly*): What is a runner?

BARCHESTER: A runner, my child, is a nurse who combines the hardships of both wards with the privileges of neither.

DOLE: When Girdle has a Puritan mood badly, she calls her "Scarlet."

GIRDLE: I—please.

PRO.: But why Scarlet Runner?

DOLE: Because she looks so clinging and gets along so fast.

GIRDLE: Really, Nurse Dole.

PRO.: I think she's rather nice.

DOLE: Oh, *you're* fascinated, are you? I was until we got into a row. She's very pretty and sweet, but get into hot water with her, and she'll have the very skin off your back.

BARCHESTER: Exactly like cheap bath salts.

GIRDLE: You must not say things like that.

DOLE: Girdle, have you ever said anything you shouldn't?

GIRDLE (*distressed*): Yes, dear. I once told a houseman what I thought of him.

PRO.: Is that bad?

BARCHESTER: That's what Trolopp's done.

PRO.: What happened?

DOLE: Oh, she and I were fooling, and the houseman came in when we didn't hear. And when he complained that we had our sleeves up, she said she was trying to get sunburnt in the sunshine of his smile.

PRO.: How naughty! (*Giggles.*)

GIRDLE (*severely*): Please don't giggle. Only clerks giggle.

DOLE: He was frightfully annoyed, because she'd cheeked him in Salome, and he's complained to both Sisters.

BARCHESTER: About both of you?

DOLE: No. I made myself small.

BARCHESTER (*sweetly*): How clever of you, dear, considering your figure.

DOLE (*very sweetly*): But I've had your example so long, my dearest.

GIRDLE: But Trolopp may be asked to go. You don't seem to be worried about the girl.

BARCHESTER: Worried? We're all worried. Look at the tea we've had. Nobody eats unless they're worried. That why the middle classes eat so much at funerals. It takes their minds off the will. You've all made pigs of yourselves.

DOLE: I—

BARCHESTER: Except Doley, who thinks she's safely out of the business.

DOLE: Nobody would get into a row if they could stay out.

GIRDLE: It's wrong. It's your duty to tell Sister you annoyed the houseman.

BARCHESTER: Duty is the invention of the weak-minded, and the convenience of the immoral.

GIRDLE (*sharply*): The weak-minded don't invent.

BARCHESTER: Have it your own way. The best of epigrams is that they read just as well either way, because nobody disagrees for fear they've missed something subtle.



"ENTER SISTER SALOME."

(Enter TROLOPP.)

PRO.: Here's Nurse Trolopp.

BARCHESTER: Hallo, dear. Tea?

TROLOPP: Please.

DOLE: Well, dear.

TROLOPP: When a woman says "Well" you know she's hoping for the worst. Scones? I love scones. (*Takes the plate.*) They don't have them in Salome.

PRO. (*eagerly*): Have you been there? And was Sister Jokanaan there?

TROLOPP: Yes. No. (*Munches and swings her legs.*)

BARCHESTER: Been up to something, Trolly?

GIRDLE (*to PRO.*): Go and see to Number Six (*exit PRO. grumbling.*)

TROLOPP (*munching*): I shan't corrupt her.

DOLE: You are a beast, keeping us in suspense.

TROLOPP: My dear, these are good scones. (*Puts feet on table.*)

GIRDLE: Nurse, please take your feet down.

TROLOPP: But, Girdle, there's no one about.

BARCHESTER: A woman's limbs shouldn't be seen. A man's can. It's her safeguard and his liability.

GIRDLE: How vulgar.

(*Enter PRO.*)

PRO. (*to GIRDLE*): Nurse! Number Six!

(*Exit GIRDLE and PRO. The three are left with their backs to the door.*)

BARCHESTER: Vulgarly is the name less clever people give to one's own witty remarks.

DOLE: Bother your witty remarks. Why didn't Sister go to Salome to tea?

(*Enter Sister SALOME. She stands waiting for their attention.*)

TROLOPP: Oh, I talked her round. I said that the houseman had misunderstood me, and that I was put out by being in two wards, because Salome was run so differently from Jokanaan. Then she smiled and said she understood and I could go.

DOLE: Yes.

TROLOPP: Then I flattered the houseman's self-respect.

BARCHESTER: Self-respect is the name housemen give to their vanity.

DOLE: Shut up!

TROLOPP: Then I went to Sister Salome and told her I was put out because Jokanaan was run in *such* a different way from Salome. She smiled and said she understood and I could go. (*All three laugh.*)

DOLE: That's saved me. You sauced the geese and the gander.

BARCHESTER: My dear, the gander—

SISTER SALOME: Nurse Trolopp! (*All leap to their feet, startled.*)

TROLOPP: Yes, Sister?

SISTER SALOME: When Sister returns will you please tell her I will call after my visit to the Matron? (*Exit.*) [CURTAIN.]

"CARMEN DE PRANDIENDO."

'Tis hard

I think,

For us

To think,

Of better things to do than drink,

And eat,

And smoke,

And so

Produce

Work for the willing

Gastric juice.

F. W. J. W.

ST. BARTHOLOMEW'S HOSPITAL AMATEUR DRAMATIC CLUB.

"IN THE NEXT ROOM."

A Play in three Acts.

By ELEANOR ROBSON AND HARRIET FORD.



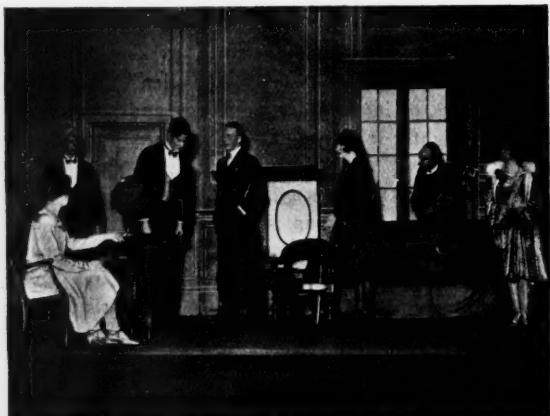
WE may say at once that we spent one of the most entertaining evenings it has been our pleasure to enjoy at the last night of this year's Christmas Entertainment, and everyone we spoke to seemed to share this opinion. To begin with, the play itself was a very happily chosen one, containing as it does a drachm or two of "love-interest" as well as a gripping plot, which drags one along by the scruff and drops one in a gasping condition at the end. The amateur is apt to revel in parts which express his soul, and the audience, not as a rule possessed of a vivid imagination in this country, has to cough to keep occupied. Throughout this play, however, the silence, except for short bursts of involuntary applause and some quite audible laughter (chiefly directed at Parks, the butler), was intense.

It was by no means a gift for the producer. Crook plays require not only an ability to cope with a cosmopolitan assembly of characters, to time to a nicety the different incidents in the *dénouement*, but (more, subtle still) to place the exact shade of emphasis on such words and actions as will be of subsequent importance, so that the most block-headed of the audience must, willy-nilly, remember them. The incident of the cigarette is an obvious example. All these elusive opportunities Mr. George Day seized with a sureness of touch that would do credit to the professional stage. His sense of humour was a great asset, for it enabled him both to avoid the banal and the ridiculous, as well as to make full play with such a situation as that in which Parks helps himself to a whiskey while treating Godfrey to a full account of his favourite subject—his own skill as a sleuth. The one criticism we have to make is, after all, a minor one—the chief detective's American accent. With the answer that it was "too good to be missed" (if it were indeed so) anyone who has acted in an amateur show will sympathize; and another legitimate reply, of course, would be that all good Englishmen prefer infinitely to score off an American or a Frenchman.

The producer was greatly helped by the excellent work of the property manager, Mr. W. A. Nicholson; on him a great deal depended, for had a hitch occurred in his complicated machinery, the skein would have become tangled into a knot past all unravelling. To the question, "How did the family jewels get into the cabinet in the first place?" the answer is the producer put them there.

The artistes themselves were all so interested that they obviously did not care a bean for applause, and merely wanted to get on with the story. Miss Hebe Horton made a first-class heroine, being charming or intense with an equally natural ability; and what is more, she continued to be plainly audible even in the "softer" passages. Mr. Melly, like all great actors, gave one the impression of having done it all heaps of times in private life, but it is surprising how difficult an everyday action such as kissing a girl over the back of a sofa becomes when it is done "to order." We noticed his difficulty in screwing his mouth round sufficiently on one occasion.

Miss Aileen Beresford as Julia contrived to make her stealthy disappearance from the sitting-room one of the most telling successes of the performance. Miss



Marion Spencer looked the part of the *grande dame* and acted with commendable reserve, but we noticed a tendency to stress her prepositions and minor words which slightly detracted from the effect of what she had to say. The A.D.S. are indeed lucky to command the services of three such beauties who have also the professional touch.

Mr. Barnes, as the amateur collector of antiques, had a part which did not appear to have been conceived in any very certain frame of mind. He himself was commendably consistent in his acting, but it appeared that neither he nor anybody else quite understood what sort of an animal an amateur collector of antiques should be.

The audience always fell for Parks whenever he came on, and Mr. Duff Scott made full use of his many opportunities. His intermittent coryza and the almost choreiform twitchings of his nose were invaluable assets. A very great deal depended on Mr. Basil Arnold as Felix Armand. To the lay eye he looked rather too malignantly to escape suspicion, but it would be difficult

to better his French intonation and gestures—a very "froggy" bit of work.

Messrs. W. J. Walter and Campbell Gordon as Inspector Grady and the false Colonel Piggott, *alias* "Crochard," did good work.

The Hall was, as usual, crowded, and the company thoroughly deserved the applause they got. Were it not for tradition the A.D.C. would at this rate soon be capable of launching out into theatreland in real earnest if only they could take their Capps or their Day with them.

STUDENTS' UNION.

RUGBY FOOTBALL CLUB.

ST. BARTHOLOMEW'S HOSPITAL v. HARLEQUINS.

ON Saturday, January 1st, the Harlequins defeated the Hospital at Winchmore Hill by five goals and a try—28 points—to a goal—5 points. Roxburgh took the place of Guinness at fly-half. The 'Quins are fortunate in possessing extremely good reserves. A fortnight previously when they had six men playing in the second International Trial Match, they defeated Gloucester by an even larger margin than the above. On this day too, they provided six men for the final trial at Twickenham.

We venture to think, though, that the score would have been different, though we by no means suggest a different result, had it not been for two facts: Well as Roxburgh played after his journey from Liverpool, our three's would have been a much more efficient attacking force if Guinness had been playing. Roxburgh is slow and runs across terribly. Again, Lloyd, the one really fast man in the team, injured a thigh and had to leave the field after twenty-five minutes' play. Briggs was taken out of the scrum. The score was five all when Lloyd left, and for the remainder of the first half the forwards held their own. In the second half we missed Briggs as wing forward. The Harlequin outsiders were able much more easily to develop their attacks without the spoiling work of Briggs. Added to this, the forwards were doing all they could, holding their own in the scrum, and they could not get back in defence.

For the first few minutes play was in the 'Quins half, but their forwards frequently showed up in fast dribbles. From a break-away by Maley, who passed to Jenkins, the ball was taken into the Harlequin "25." The 'Quins soon relieved. Grace nearly got away down his wing, but was forced into touch. Their right wing was nearly over. After twenty-three minutes Rowe gathered from a kick ahead by Roxburgh, broke through and scored between the posts. Gaisford converted. From the long kick-off Gaisford was too slow in clearing and his kick was charged down. T. P. Williams brought play back into their "25." The ball was passed quickly out to the 'Quins, left wing who, when confronted by Gaisford, gave a beautiful inside pass for his centre to score. Hubbard converted. Lloyd went off after this try. The Harlequins continued to press and narrowly missed a drop at goal.

From the kick-off of the second half Gaisford found touch on the half-way line. Their forwards again showed up prominently in the loose. Petty cut through but would not pass. From a scrum in their "25" the Harlequins got away, and at the half-way line, with only Gaisford to beat, the man with the ball had two men on each side of him. Marshall scored for Hubbard to convert. Soon after Petty was again at fault, hanging on too long, and Briggs dropped a long pass out by T. P. Williams. In the last twenty minutes they scored four more tries, but during this time the forwards put in several fierce rushes, and Briggs was a little unlucky not to score after a fine dribble along the touch-line started by Jenkins.

Except on one or two occasions the tackling was good. Grace and Rowe played well. T. P. Williams was not in his usual good form, frequently fumbling badly. Briggs played another good game. We hope the general unfitness can be explained merely by Christmas.

Team: W. F. Gaisford (*back*); A. H. Grace, G. F. Petty, J. T. Rowe, W. J. Lloyd (*three-quarters*); G. P. Roxburgh, T. P. Williams (*halves*); E. S. Vergette (*capt.*), R. N. Williams, G. R. Jenkins, R. H. Bettington, M. L. Maley, D. S. Briggs, T. S. Pittard, H. D. Robertson (*forwards*).

ST. BARTHOLOMEW'S HOSPITAL v. OLD PAULINES.

On Wednesday, January 5th, at Winchmore Hill, we defeated the Old Paulines by a dropped penalty goal and two tries—9 points—to nil. Frederick played full-back, and reserves had to play for Lloyd, Guinness, Bettington, Maley and Robertson. After a wet morning the afternoon was fine, but the ground was left in a heavy, slippery condition.

From the kick-off the Old Pauline forwards attacked and put in several good rushes. They gave their backs several chances, and Frederick was called on to stop their left wing near the line. The pressure was relieved and we were soon in a good position with a scrum in their goal mouth, but the Paulines relieved. Handling became increasingly difficult, and we saw a game of loose forward rushes, with an occasional kick ahead from Roxburgh. More and more did our forwards take command of the game, and after twenty minutes McMasters scored after short passing on the right. Pittard failed with the kick. The forwards continued to dribble well and Pittard was always prominent. There was an anxious moment when Frederick was passed, but Roxburgh relieved. Passing among the backs was rare, but Rait-Smith, Prowse and Rowe made fifty yards in one good movement. Half-time came with Bart's pressing hard ten yards from their line.

At the beginning of the second half Frederick was called on three times in quick succession. First he brought down a man who intercepted, and then relieved twice with good kicks to touch. Our forwards then took the game in hand and brought play well into their half. Rowe nearly scored, but knocked on when over the line. The Old Paulines then put in a strong attack, which ended in a man going over, only to be recalled for a forward pass. T. P. Williams started passing movements, but Rait-Smith knocked on badly twice. Grace put in a good run, but failed to pass the full back. Roxburgh failed with a good attempt to drop a goal. We were attacking very strongly just now and it seemed that we must score soon, but there were only six minutes left when T. P. Williams dropped a good goal from an awkward angle from a penalty awarded for offside. In the next minute Rowe intercepted a pass and kicked ahead. R. N. Williams joined him, and Briggs picked up and started a short passing movement which ended with Dunkerley, playing in the scrum, going over for a try. Pittard was unsuccessful with the difficult kick. Bart's kept up the attack, but just on time the Paulines rushed the ball up to within a few yards of our line.

It was not an interesting game to watch, though occasionally a good forward dribble was seen. Frederick was very safe at back and the other outsiders defended well. T. P. Williams played well under the difficult conditions and Roxburgh played the right game, though his kicks ahead would have been better had they been higher. Vergette got his forwards going well, but it took him all his time and half the game. The pack should not need such a vast amount of encouragement before they go all out. Pittard frequently hooked well, but often the ball was held up in the back row.

Team: E. V. Frederick (back); A. H. Grace, B. Rait-Smith, C. B. Prowse, J. T. Rowe (three-quarters); G. P. Roxburgh, T. P. Williams (halves); E. S. Vergette (capt.), R. N. Williams, C. R. Jenkins, D. S. Briggs, J. T. Dunkerley, J. A. Edwards, A. M. McMaster, T. J. Pittard (forwards).

ST. BARTHOLOMEW'S HOSPITAL v. OLD BLUES.

On Saturday, January 8th, at Winchmore Hill, we were without Guinness, Bettington and Gaisford, but so efficiently did Capper and Frederick substitute for the latter two that it was only Guinness whom we really missed. The ground was in excellent condition and the ball dry, and the handling of the Old Blues so much better than ours that they won by two placed goals, a penalty goal and three tries—22 points—to a placed goal—5 points.

Almost immediately the Old Blues opened the scoring from a penalty, Nielson dropping a beautiful goal from about forty yards out. After this our forwards, playing eight against their seven, heeled the ball more often than not. Roxburgh, according to plan, kicked up the field, and after ten minutes' play Franklin was forced to carry over. From the five yards' scrum our forwards heeled smartly and T. P. Williams worked the blind side, Grace crossing the line and scoring in a good position. Pittard converted.

Soon after T. P. Williams had a kick charged down and the Old Blues came into our "25." They went over on our left, but were recalled for a forward pass. The game soon resolved itself into a duel between our forwards and their backs, but whereas our forwards were only having slightly the better of things, their backs showed a marked superiority. Roxburgh was far too slow in getting his

kick in and was forced to "carry over." The Old Blues scored a try, which Franklin failed to convert. Three minutes later, however, their left wing passed inside when confronted by Frederick near our line. One of their several forwards, following up, took the pass and scored. This time Franklin kicked a goal.

Prowse was prominent in a good dribble up the field, and, after T. P. Williams had just failed to pick up to score, the ball went into touch five yards from their line. Prowse missed a drop at goal and they added another goal. The ball was kept on the move from one end of the field to the other, either at our feet or in their hands.

In the first ten minutes of the second half we missed several chances of scoring. Maley went over once from a pass from Jenkins, following a cut through by Prowse, but the final pass was forward. Rait-Smith then tried to drop a goal when he had an overlap outside him. Immediately afterwards Rait-Smith made a clever mark, but allowed his drop at goal to be charged down. From a long cross-kick by their right wing, another of their forwards scored far out on their left. T. P. Williams was gaining ground with good kicks and our forwards were keeping up pressure, but their outsiders were always dangerous. Roxburgh missed with a drop at goal, and Rowe just failed to take a difficult pass near their line. Maley had to be carried off with an injured knee fifteen minutes before the end. During this period Frederick, who had been playing finely throughout, was kicking extremely well. Just before time Franklin opened up the game and they scored on their right.

It was an interesting and instructive game in many ways. The key-note of the Old Blues' game was attack, and they attacked from any part of the field. Defence was not neglected, their falling on the ball and tackling being distinctly good. Capt. F. W. H. Pratt was a good referee. He was always up with the game and showed a fine appreciation of the advantage rule, which, perhaps, he carried to extreme limits. We thought that he was not strict enough with "lying on the ball."

Our forwards played well, though, in estimating their value, it must be remembered that they only had seven immediate opponents. Pittard hooked well. Maley and Capper were always prominent in the line-outs. Jenkins showed up particularly in the loose. Behind the scrum T. P. Williams played well, being full of resource. Roxburgh is slow, but defends well. The three-quarters were disappointing. We know their limitations now, and they can play better than this. On this day there could be no excuse for dropping passes. They all do good things at times, but then they promptly will do something horrible. Frederick is an amazing man! His kicking has improved immensely, but how he finds touch so accurately and so far down by running into the touch-line is a mystery to us all. His tackling was very safe. Altogether he compared very favourably on the day's play with Franklin, who plays in the second International trial.

Team: E. V. Frederick (back); A. H. Grace, B. Rait-Smith, C. B. Prowse, J. T. Rowe (three-quarters); G. P. Roxburgh, T. P. Williams (halves); E. S. Vergette (capt.), R. N. Williams, C. R. Jenkins, M. L. Maley, G. D. S. Briggs, W. M. Capper, T. J. Pittard, H. D. Robertson (forwards).

P. G. LEVICK,
Hon. Treasurer.

ST. BARTHOLOMEW'S HOSPITAL v. COVENTRY.

Played on January 15th. For this match both sides were weakened, Coventry by the absence of six of their team while we were without Bettington and Maley, while Pittard missed the train and we were extremely lucky to find so capable a substitute in W. A. Bourne, who, in spite of his lack of recent play, turned out for us and played very well.

The first half was very even. Coventry gained a five-points' lead through one of our centres missing his man, but otherwise we had as much of the game as they did. In the second half, after another converted try by our opponents, Guinness scored a remarkably fine individual try for us, which Gaisford converted. A penalty goal in the last few minutes left us beaten by 13 points to 5. The outstanding feature of the game was Guinness's brilliance both in attack and defence; seldom, even in the highest class of football, have we seen his display eclipsed, and his try was worthy of any player known. All our backs played well. Gaisford's defence was good and T. P. Williams was at the top of his form, while none of the three-quarters had any cause for self-reproach.

In the second half we were unfortunate to sustain several mishaps. The forwards suffered particularly, Williams being completely knocked out by a blow which, as was discovered later, fractured his antrum, while a sprained ankle and torn muscle were incurred by other members of the pack. In the circumstances the result was

good. Coventry have a young team which is showing astonishingly good form, and the game we played against them was a good one.

Capper showed that he is an exceedingly useful forward in the loose as well as in the scrum, while Jenkins's defence was of inestimable value to us.

Team: W. F. Gaisford (*back*); A. H. Grace, G. P. Roxburgh, C. B. Prowse, W. J. Lloyd (*three-quarters*); H. W. Guinness, T. P. Williams (*halves*); E. S. Vergette, W. M. Capper, R. N. Williams, J. A. Edwards, H. D. Robertson, C. R. Jenkins, W. A. Bourne, J. D. S. Briggs (*forwards*).

E. S. VERGETTE.

Owing to the widespread frost, the match on January 22nd against Bradford, away, had to be scratched.

On Thursday, February 3rd, we embark on the cup-tie matches with a match against Middlesex. Should we be successful, we ought to enter the semi-final round at the expense of U.C.H., when we meet King's. We all hope that Vergette, R. N. Williams and Maley will fully recover from their injuries, and that no further injuries will be sustained. The team has had a strenuous season and have done better than the results indicate. A. W. L. Row is training the team for the cup-ties, and we hope he will have his reward by the team not only entering the final, but winning the cup.

At about the same time the "A" XV play their corresponding match in the Junior cup-ties. May they be as successful as last year. All members, past and present, of the Hospital will wish both teams the very best luck, and we hope that at all the games both teams will be cheered on by a large, enthusiastic crowd on the touch-line.

P. G. L.

ASSOCIATION FOOTBALL CLUB.

ST. BARTHOLOMEW'S HOSPITAL v. OLD CHOLMELEIANS.

Played at New Barnet on January 8th, the Hospital team were beaten by 9 goals to 5. The weak Hospital defence were very prone to miskick, and although the score at half-time was 4-4, our opponent ran away in the second half with 5 more goals. Just before full-time the Hospital scored again. Goals were scored for the Hospital by Mailer (2), Gibb (2) and Caplan.

Team: B. W. Cooke, *goal*; T. C. R. George, A. Bennett, *backs*; H. W. G. Staunton, I. Q. Evans, C. Keane, *half-backs*; A. M. Gibb, J. S. H. Wilson, A. Caplan, W. A. R. Mailer, I. E. Phelps, *forwards*.

ST. BARTHOLOMEW'S HOSPITAL v. LOUGHBOROUGH COLLEGE.

The Hospital succeeded in winning this game at Winchmore Hill on January 15th by 3 goals to *nil*, after a fast game. Although the Hospital forwards attacked for the greater part of the first half, they only scored once, through Burgess, following a corner. In the second half the Hospital maintained their form, and further goals were added by Burgess and Mailer.

Team: J. H. Watkin, *goal*; A. Bennett, H. Roache, *backs*; J. R. Crumbie, C. Keane, C. A. George, *half-backs*; A. M. Gibb, J. S. H. Wilson, W. J. Burgess, W. A. R. Mailer, I. E. Phelps, *forwards*.

INTER-HOSPITAL CUP-TIE.

1st Round.

ST. BARTHOLOMEW'S HOSPITAL v. MIDDLESEX HOSPITAL.

Played at North Wembley on a very muddy ground, this game was won by 7 goals to 6. Our forwards started off with a great rush, and we were soon two goals up. Shortly afterwards Jenkinson and then later Mailer were both injured, and the team did well to lead 5-3 at half-time. In the second half, playing against the slope, the forwards again pressed heavily and scored two further goals. The defence, and in fact the whole team, were rapidly tiring, and Middlesex put on 3 goals, the last coming just as the whistle blew for full time. Cooke, who was called on at the last moment, played a very fine game in goal. The team, however, must be more determined in their efforts to get to the ball, and must also train hard if they hope to beat Thomas's in the semi-final. Goals were scored by Mailer (2), Evans (2), Gibb (2) and Crumbie.

Team: B. W. Cooke, *goal*; T. C. R. George, E. N. Jenkinson, *backs*; J. R. Crumbie, I. Q. Evans, C. Keane, *half-backs*; A. M. Gibb, J. S. H. Wilson, W. J. Burgess, W. A. R. Mailer, I. E. Phelps, *forwards*.

HOCKEY.

ST. BARTHOLOMEW'S HOSPITAL v. D/EAST SURREY REGT.

The 1st XI opened the second half of the season by visiting the East Surreys at Kingston Barracks, where, on a very heavy ground, they won very easily by 13 goals to 2.

In the first half the Hospital were on top from the very start and scored 8 times without response, but in the latter part of the game the soldiers played with rather more dash and put on a couple of goals. It was a very one-sided game, and against a weak defence the Bart's forwards had a good afternoon—all doing well, with Slinger and Sinclair forming a very good right wing. The defence were not often tested except in the last part of the second half, when the East Surreys scored their goals—goals which would have been prevented had not the backs been playing rather far up the field.

Team: R. W. Windle; F. H. McCay, P. M. Wright; J. H. Attwood, K. W. D. Hartley, W. F. Church; M. R. Sinclair, L. A. P. Slinger, A. G. Williams, V. Thorne-Thorne, H. B. Stallard.

ST. BARTHOLOMEW'S HOSPITAL v. CHATHAM NAVY.

Playing at Chatham on Saturday, January 15th, the Hospital, although having about three-quarters of the game territorially, lost by 2-5. Slowness among the inside forwards and inability to deal with the Navy's centre-forward were the causes of the defeat. A. G. Williams was absent, and A. D. Iliff took his place.

At half-time the Navy led by 2-1, and afterwards added 3 more goals. Their centre-forward was very fast, and their whole team were quick on the ball and took advantage of all their opportunities.

For the Hospital Windle was in very good form in goal and Wright and McCay made a good pair of backs. Wright, however, was too often guilty of "sticks." The halves had plenty of work both in attack and defence and were better in attack. As stated, the Chatham centre was a great trouble when his side made their rather rare dashes to the Bart's circle. Sinclair was much better marked than usual, and while Symonds worked very hard at inside right, the other forwards were slow.

Team: R. W. Windle; F. H. McCay, P. M. Wright; J. H. Attwood, K. W. D. Hartley, W. F. Church; M. R. Sinclair, J. C. Symonds, M. W. Clatel, A. D. Iliff, F. C. Roles.

SWIMMING.

ST. BARTHOLOMEW'S HOSPITAL v. KING'S COLLEGE.

This, the first game of the year, was played at Great Smith Street Baths on Thursday, January 20th, and was marred by the unavoidable and unanticipated absence of the captain, F. A. Edwards. To fill his place we were lent a man, who, however, did not seem to fit well into the team.

The Hospital defended the deep end in the first half, and before play had continued more than a minute one of the opposing backs broke away unmarked from a little loose play near their 4-yard line, and was left ample time to send in a long shot in the corner which left Williamson no chance. For the rest of the half play was mostly in the shallow end, and several good shots were punched out by their goalkeeper, who, owing to his height and the unusually small depth of the water, found his task an easy one.

In the second half play still remained chiefly at the College end, but it was in the forward line that the Hospital were weak, both West and Fisher playing out of their usual position, and the right wing being a stranger to the team. The score was equalized soon after half-time by a goal scored by Fisher from a scrumage within a few yards of their line. Later Vartan came up to take West's place, but was hampered by his injured arm; some good shooting by the former and Race met with very bad luck, several shots hitting the crossbar. The score remained even till "no-side."

The team as a whole showed encouraging form in this match; Race in particular, who promises to be a distinct acquisition to the side, played well at half, and all members of the team showed a marked improvement on last season's standard—the result, it is to be supposed, of the weekly practices.

One is tempted to add that, had we played our full team, we should have started the season with a decisive victory.

Team: J. C. F. L. Williamson; H. D. Robertson, C. K. Vartan; R. Race; F. A. Edwards (capt.), J. F. Fisher, J. H. West.

CORRESPONDENCE.

To the Editor, 'St. Bartholomew's Hospital Journal.'

THE CHRISTIAN UNION.

DEAR SIR,—We have been fortunate enough this term to gain the services of some very distinguished men for our meetings each Thursday at 5 p.m. in the Library.

We have already had Prof. Albert Carless, F.R.C.S., and are looking forward to hearing such men as Howard Cook, Esq., M.S., F.R.C.S., Admiral Sir Harry Stileman, Dr. Alfred Burton, and others.

May I draw the attention of your readers especially to a series of addresses to be held during February in the Library at 5.30 p.m., preceded each day by tea at 5 p.m.:

Monday, February 21st, Mr. Montague Goodman. Subject: "What Luther found at Rome."

Tuesday, February 22nd, Mr. Montague Goodman. Subject: "Jonah and the Whale."

Thursday and Friday, February 24th and 25th, Dr. Alfred Burton. Subject: "How far does Christianity concern the doctor?"

Further particulars concerning the Christian Union may be had from S. F. Russell, C. H. Devin, J. W. C. Symonds, and H. W. Guinness.

Yours very sincerely,
H. W. GUINNESS.

BACK NUMBERS.

To the Editor, 'St. Bartholomew's Hospital Journal.'

DEAR SIR,—I should be much obliged if any reader of the JOURNAL could see his way to send me a copy of the JOURNAL for the following dates, viz. November, 1917, December, 1917, July, 1921, November, 1921, and a copy of the Index for 1904. These numbers are required for a set of the JOURNAL for 1900 to 1926, which I am giving to the Library at Marischal College, Aberdeen.

Yours faithfully,
G. H. COLT.

12, Bon Accord Square,
Aberdeen;
December 31st, 1926.

NATIONAL UNION OF STUDENTS.

To the Editor, 'St. Bartholomew's Journal.'

SIR,—With the generous help of the Carnegie United Kingdom Trust, the National Union of Students has published a *Guide to Library Facilities and Printed Sources of Bibliographical Information*. Excellent facilities of both kinds exist, which are not used by many students because, never having considered what *sorts* of bodies and publications contain the bibliographies of their subjects, they do not know how to familiarize themselves with them. To put this potential demand in touch with the existing supply is a very important need, and an indisputable prevention of waste.

Young organizations, like the county libraries and the central libraries for students with their outlying libraries, are striving to *create* and satisfy an intelligent demand for books from those who, by their own resources, could obtain but tardy and inadequate access to the better-equipped libraries. Yet invaluable labour-saving instruments, like the *Subject Index to Periodicals* and the *International Catalogue of Scientific Literature*, are languishing for want of support. If a student never learns to discover his bibliographical guides for himself, he becomes an incubus on the librarian, and is contributing to the waste of the enormous mass of printed knowledge already in existence.

The Guide referred to aims at helping to abolish this unsatisfactory, not to say paradoxical, state of affairs.

Yours very truly,
The National Union of Students, R. NUNN MAY,
3, Endsleigh Street, Secretary,
London, W.C. 1;
January 7th, 1927.

REVIEWS.

WHEELER'S HANDBOOK OF MEDICINE. By WILLIAM R. JACK, B.Sc., M.D., F.R.F.P.S.(Glas). 8th Edition. (Edinburgh: E. & S. Livingstone, 1927.) Pp. xiii + 630. 12s. 6d. net.

The position of a handbook written about any subject is always equivocal. Its popularity as a quick way to knowledge is counterbalanced by the odium it incurs from those who believe that thicker books mean surer truths. They may, but the truth is usually bewildering at the first reading and voluminous at the last.

Often the shorter book gives a student his first view of medicine as an organic whole, and delivers him from the obsession that the subject is an unrelated list of diseases.

If students take this eighth edition of "Wheeler and Jack" at its face value, they cannot go far wrong. For revision and a quick survey of a subject the book deserves its popularity. And for the dull-minded there are intimations in the text of its own deficiencies. No new article is added to this edition, but it has been revised and slightly enlarged.

THE HEALTH VISITOR'S GUIDE. By LUCY E. ASHBY and K. A. EARP. (Faber & Gwyer, Ltd.) 3s.

The authors attempt to put into one small volume knowledge which requires some years of hospital training and actual contact with patients and the public to acquire. The chapter on artificial feeding may be read with interest, but the wisdom of wholesale advice of the use of dried milk seems doubtful.

There is a useful list of helpful organizations at the end.

GENERAL NURSING QUESTIONS AND ANSWERS. By DORIS TAYLER. (Faber & Gwyer.)

This book gives specimen questions and model answers on all subjects included in the syllabus of the State Examinations (General Section), and will be found useful to nurses when several meet for a "grind," and also for their written work, both oral and written specimens being given.

NURSING OF DISEASES OF THE NOSE, EAR AND THROAT. By MICHAEL VLASTO. (Faber & Gwyer, Ltd.) 6s.

This book is a very welcome addition to nursing literature; it gives in clear language a description of the diseases of these organs, the various treatments and chief nursing points in connection with them.

TYPES OF MIND AND BODY. By E. MILLER, M.A.(Cantab.), M.B., M.R.C.S., D.P.M. (Kegan Paul, Trench, Trübner & Co., Ltd.) Pp. 132. 2s. 6d. net.

This is one of the attractive "Psyche Miniatures," which comprise a medical series to which Dr. Crookshank and Dr. Kinnier Wilson are among the contributors, as well as a general group dealing with Economics, Social Psychology and other topics of the day, and which are published in connection with the well-known quarterly, *Psyche*. Their red and white colouring is quite familiar already.

The present volume is very interesting as correlating the various classifications of human beings into types, which, as the author says, "is a very ancient pastime." He leads up to the psychological aspect through the morphology (comprising Kretschmer's pyloric and asthenic groups), and the physiological aspect (which is chiefly concerned of course with endocrinology and the vegetative nervous system). Psychologically the cyclothyme-schizothyme division arises from Kraepelin's work on the manic-depressive and schizophranic groups.

When the author applies his ideas to examples from literature, he is especially interesting on the contrast between Paul Verlaine and Baudelaire, and on Bunyan, Byron and Milton, of whom there are portrait illustrations.

We wished the book were longer, and sat down to read others of the series.

INFECTIONS OF THE HAND. By LIONEL R. FIFIELD, F.R.C.S.(Eng.). (H. K. Lewis & Co., Ltd.) Pp. 192. 67 illustrations.

The author of an excellent "Minor Surgery" has written a very exhaustive account of problems which are important both because of their daily occurrence, and because they "are often neglected until irreparable damage is done." Being Surgical Registrar and Demonstrator of Anatomy at the London Hospital, he has had unrivalled opportunities. The first chapter on "Anatomy" should be valuable from the point of view of the Primary Fellowship Examination, and a knowledge of the rest of the book would make a house-surgeon really happy over his visits to the Minor Op. Theatre. The illustrations comprise radiograms, some excellent explanatory diagrams, and drawings of frozen sections and dissections.

MANUAL OF MEDICINE. By A. S. WOODWARK, C.M.G., C.B.E., M.D., F.R.C.P. 3rd Edition. (Humphrey Milford, Oxford University Press.) Pp. 523.

We have heard people say that they backed "Woodwark" to get them through the M.R.C.P. examination. Without feeling absolutely confident on this matter, we agree that for its size this book contains a most astonishing amount of valuable matter. The present edition has been thoroughly brought up to date in so many ways that an enumeration of them is impossible. An instance taken at random: the treatment of tuberculosis includes an excellent account of the tuberculin, the *Bacillus Calmette-Guérin*, and a page and a half on artificial pneumothorax which contains all that could be desired on the subject.

ELEMENTS OF MEDICAL TREATMENT. By ROBERT HUTCHISON, M.D., F.R.C.P. (Bristol: John Wright & Sons, Ltd. London: Simpkin, Marshall, Hamilton, Kent & Co., Ltd.) Pp. 163. 7s. 6d.

This book is founded on an annual course of lectures on elementary therapeutics given by the author at the London Hospital, in which the principles of treatment were discovered and their practical application illustrated by the example of certain typical diseases. Chapters on psychotherapy, insulin, and some minor medical operations complete the subject, except for "physical treatment," which is intentionally omitted. As with everything this author writes, this course, found by many to be unpalatable, has been served up in a very appetizing manner, and the practice of analysing many prescriptions he gives cannot fail to meet with general approval.

THE PRINCIPLES OF PHYSICAL CHEMISTRY FOR MEDICAL STUDENTS. By P. M. TOOKEY KERRIDGE, with an Introduction by Prof. A. V. HILL, F.R.S. (Oxford Medical Publications, 1927.) 5s.

The increasing importance of the use of physical phenomena in elucidating physiological action makes the publication under review doubly welcome.

Research in recent years has stressed the rôle of metallic ions in biological reactions, such as blood-coagulation, and the vital part played by hydrogen ion concentration in the regulation of respiration and of enzyme action.

In the limited number of text-books dealing with the applications of physical chemistry to physiology and to medicine the bias is often too chemical, and the student has to wade through a sea of facts which, although important, rather tend to obscure the fundamental principles. Such is not the case with Mrs. Kerridge's book, the theoretical side (Part I) of which is clearly and concisely written and the main points readily grasped.

The chapters (IX and X) dealing with hydrogen ion concentration and its practical measurement are particularly good, and will help to clear up many difficulties usually encountered by students in attacking such problems. An improvement in the arrangement of the subject-matter could be made if Chapters IX and X succeeded Chapter V, which gives an account of electrolytic dissociation.

The diagrams are well drawn, while the practical work (Part II) has been wisely selected.

If the experiments are carried out in conjunction with the theoretical reading, the book should prove invaluable to senior medical students and to those taking B.Sc.Hons. in Physiology.

H. GORDON REEVES.

MANUAL OF OPERATIVE SURGERY. By Sir H. J. WARING, M.S., M.B., B.Sc., F.R.C.S. 6th Edition. (Oxford University Press, 1927.) Pp. 868. 618 illustrations. 18s. net.

Among the shorter works on operative surgery this manual takes a prominent place. Apart from a general revision, Mr. Harner has revised the chapter on diseases of the nose and throat and Mr. Foster Moore the chapter on ophthalmic operations. The whole comprises a wide and detailed survey of operative technique, prefaced by a valuable discussion of general principle.

Mr. Keynes has added a section on blood transfusion, while the new illustrations are as clear and vivid as the older.

The book is especially valuable to the St. Bartholomew's student as an exposition of the operative principles held in the Hospital.

INVALID DIET. By DOROTHY MORTON. (William Heinemann [Medical Books] Ltd.) 5s. net.

This small book, containing useful hints, excellent cookery recipes, not only for the invalid, but also for the ordinary person seeking easily prepared novelties in the food line, and helpful menus, should be very useful, more especially to the private nurse, who so often has difficulty in thinking of useful and palatable methods of preparing nourishment for her invalids.

DISEASES OF THE HEART AND LUNGS. By A. I. G. McLAUGHLIN. (Faber & Gwyer, Ltd.) 4s. 6d. net.

This is a very brief manual on the principal disease of the thoracic organs, unequally written, for whereas the description of preparing for an artificial pneumothorax is good and clear, that of the insertion of Southey's tubes is very poor. It is not necessary for the nurse to know how to stain for tubercle bacilli; how to give continuous oxygen, rather than the intermittent method mentioned, would come in her province. It is open to doubt whether sponging a pneumonia 4-hourly would do more harm than good in the majority of cases.

HANDBOOK FOR NURSES. By J. K. WATSON. 7th Edition. (Faber & Gwyer Ltd.) 7s. 6d. net.

This text-book, which in its early editions was a good book of its class, is now old-fashioned in its nursing methods, and its Appendix A is inadequate in its descriptions. A hot-air bath could not be properly done from the information here set out; and nutrient enemata, surely now obsolete, cannot be properly administered with a ball syringe.

SURGICAL APPLIED ANATOMY. By Sir F. TREVES, Bart. 8th Edition. Revised by C. C. CHOYCE, C.M.G., C.B.E., B.Sc., M.D., F.R.C.S. (London: Cassell & Co., Ltd., 1926.) Pp. 727. 14s. net.

Anatomy and surgery, in the mind of the student, do not make a harmonious pair. If anything is likely to bring about a wedding of the two, without burdening the mind with on the one hand, details of anatomical research, and on the other, considerations of surgical technique, it will be a manual of the sort Sir Frederick wrote in 1883. The latest edition has been revised by Prof. Choyce, who has added 27 more pages of matter.

The volume is still thin enough to be a pocket manual, and fat enough to skimp nothing. Some of the plates might be renewed. They show the haze of old age—unforgivable in a small anatomical illustration. Otherwise the book is as good as ever.

MEDICAL CASE-TAKING. By A. MILLS KENNEDY, M.D.(Glas.). (London: Edward Arnold & Co., 1926.) Pp. 148. 5s. net.

A readable book on medical case-taking which is comprehensive and clear. It steers adequately between the Scylla of being a tedious synopsis of physical signs, and the Charybdis of being uselessly elementary even to the clinical clerk for whom it is intended.

POCKET GUIDE SERIES: THE MUSCULAR SYSTEM. By HAROLD BURROWS, C.B.E., M.B., B.S.(Lond.), F.R.C.S. (London: Faber & Gwyer, Ltd., 1926.) Pp. 183. Illustrated. 4s. 6d. net.

The muscles are dealt with according to their mechanical action on the various joints. The guide should be useful to those who desire to revise quickly the gross anatomy of the muscular system of the body.

SELF-CARE FOR THE DIABETIC. FOR THE USE OF DIABETIC PATIENTS. By J. J. CONYBEARE, M.C., M.D.(Oxon), F.R.C.P. (Lond.). (Oxford Medical Publications.) 3s. 6d. net.

Success in the treatment of diabetes largely depends upon whether the patient can intelligently interpret the doctor's orders. Most practitioners, we think, will agree that the difficulty in treating diabetes lies not so much in determining the appropriate diet, or the amount of insulin required, nor in dealing with complications and intercurrent conditions, but in explaining to the patient enough of the nature of his disease and its treatment to get his willing co-operation, and in helping him with the details of his diet.

The doctor prescribes the total daily amounts of protein, carbohydrate and fat, but it rests with the patient to interpret this in terms of food, to vary his diet for himself and make it palatable. He must be taught how to do this, with the help of tables of food values and specimen menus. An excellent and time-saving method of giving this instruction will be to add to his prescription, "*Self-Care for the Diabetic*, by Dr. Conybeare." This little book is "a recapitulation of what a physician would like to tell his diabetic patients had he sufficient time to do so."

Chapter III, which deals with the general principles on which a diabetic diet is based, Appendix I, which gives the protein, fat and carbohydrate values of common food-stuffs and common "diabetic foods," Chapter VII on diabetic cookery, and Chapter VIII, giving daily menus for a diabetic, should be very helpful in constructing and varying the daily diet. For those diabetics who need insulin, details of the method of injection and precautions to be observed will be found in Chapter V.

What Dr. Conybeare would like to tell his diabetic patients he tells so well that we confidently recommend his book both to the patients to whom it is addressed and to all who practise medicine.

ELEMENTARY MORPHOLOGY AND PHYSIOLOGY FOR MEDICAL STUDENTS By J. H. WOODGER, B.Sc. (London: Humphrey Milford, Oxford University Press.) Pp. 528. 12s. 6d. net.

The intention of the author of this book has been to furnish an account of biological phenomena in which consideration is given to the special needs of the student of medicine. It is suggested that text-books too often present the subject unattractively in the form of masses of disconnected anatomical facts.

We have, of course, the greatest sympathy with any effort to render a biology course more interesting and of more permanent value. Within the limits which he has laid down Mr. Woodger has been at some pains to set forth his subject in a connected form, and we feel he has achieved a considerable measure of success. Yet the presentation of biology as a science will be more truly educational as well as more attractive if it is dealt with as a whole and not merely from the zoological side, as in this volume.

The arrangement of the work is somewhat unusual. It is of interest to observe that the author has adopted the more logical course of dealing with the Protozoa and the less complex Metazoa before proceeding to consider the vertebrate types. Under these circumstances it seems unnecessary to place at the beginning of the book a chapter on the general structure of the frog, followed by one on vertebrate histology. Surely the latter, at all events, might have been more suitably incorporated elsewhere. An exceptional feature in a work of this kind is the chapter on animal behaviour, in which various mental phenomena are discussed. This is a bold attempt to make the student regard animals from yet another angle, but it is, perhaps, a little doubtful whether it will succeed.

The book is very fully illustrated, and its get-up leaves nothing to be desired. In these days of expensive text-books the price is extremely reasonable.

MATERIA MEDICA AND THERAPEUTICS. By J. M. BRUCE, C.V.O., M.A., M.D., F.R.C.P., and W. J. DILLING, M.B., Ch.B. 13th Edition. (London: Cassell & Co., Ltd., 1926.) Pp. xiii+686. 12s. 6d. net.

In the six years that have elapsed since the twelfth edition of this book was published much has been added to our knowledge of materia medica and therapeutics.

This present edition is divided into three parts, one dealing with materia medica, the second with special therapeutics, and the third with general therapeutics. The revision is thorough. Insulin and the newer proprietary compounds for the treatment of protozoal and other parasitic diseases are fully dealt with.

Since the introduction of the hygienic treatment of the many forms of tuberculosis more attention has been paid to general therapeutics. Light and dieting are as valuable to the practitioner as any drug in the Pharmacopœia. Although sections upon these subjects are included, they are not treated as fully as one could wish, even for a manual of this size. Diet especially needs careful consideration in the treatment of diseases of metabolism, and a wider exposition of this subject would complete a very useful book.

BOOKS RECEIVED.

CATALOGUE OF SPORTS AND PHYSICAL CULTURE BOOKS. (W. & G. Foyle, 121-125, Charing Cross Road, W.C. 2.)

RECENT BOOKS AND PAPERS BY ST. BARTHOLOMEW'S MEN.

ELMSLIE, R. C., O.B.E., M.S., F.R.C.S. "The Treatment of Hallux Valgus and Hallux Rigidus." *Lancet*, September 25th, 1926.

— "Case of Congenital Dislocation of Both Hips Treated by Bifurcation Operation." *Proceedings of the Royal Society of Medicine*, August, 1926.

FLETCHER, SIR WALTER, F.R.S., M.D., F.R.C.P. "The Future of Women in Medicine." *Lancet*, October 9th, 1926.

FORBES, J. GRAHAM, M.D., F.R.C.P., D.P.H. "Post-Scarlatinal Meningitis." *Lancet*, December 11th, 1926.

FRASER, FRANCIS, R., M.D., F.R.C.P. Ed. Addendum to the "Discussion on the Treatment of Pulmonary Tuberculosis with Sanocrysin." *Proceedings of the Royal Society of Medicine*, September, 1926.

— (and DUNHILL, T. P., C.M.G., M.D.). "Exophthalmic Goitre." *Clinical Journal*, December 8th, 1926.

GARROD, SIR ARCHIBALD E., K.C.M.G., D.M., LL.D., F.R.S., F.R.C.P. "Science of Clinical Medicine." *Lancet*, October 9th, 1926.

GORDON-WATSON, SIR CHARLES, K.B.E., C.M.G., F.R.C.S., and SHAW, WILFRED, M.B., B.Ch., F.R.C.S. "A Case of Axial Torsion of the Fibromyomatous Uterus." *Journal of Obstetrics and Gynaecology British Empire*, Autumn No., 1926.

HADFIELD, GEOFFREY, M.D. "The Pathology of Cervical Erosion." *Bristol Med.-Chir. Journal*, Autumn, 1926.

HALL, ARTHUR J., M.A., M.D., F.R.C.P. "Halogen Eruptions." *Lancet*, November 6th, 1926.

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HORDER, SIR THOMAS, Bart., K.C.V.O., M.D., F.R.C.P. "An Address on the Aims and Methods of Health Education." *Lancet*, October 16th, 1926.

HORNE, W. JOBSON, M.D. "The Role of the Lymphatics in Laryngeal Disease, and the Role of the Larynx in Lymphatic Disease." *Proceedings of the Royal Society of Medicine*, October, 1926.

HOWELL, C. M. HINDS, M.D., F.R.C.P. "Encephalitis Lethargica followed by Myelitis." *Proceedings of the Royal Society of Medicine*, August, 1926.

HURRY, JAMESON, B., M.A., M.D. *Imhotep*. London: Oxford University Press, 1926.

JORDAN, ALFRED C., C.B.E., M.D., M.R.C.P. *Chronic Intestinal Stasis: A Radiological Study*. 2nd Edition. London: Oxford University Press, 1926.

KERR, JAMES, M.A., M.D., D.P.H. *The Fundamentals of School Health*. London: Geo. Allen & Unwin, 1926.

- KEYNES, GEOFFREY, M.D., F.R.C.S. "Papilloma of the Renal Pelvis Diagnosed by Pylography." *British Journal of Surgery*, October, 1926.
- "Blood Transfusion in Surgery." *British Medical Journal*, November 27th, 1926.
- KING, H. H., M.B., B.S., I.M.S. "A Summary of Recent Work on Lobar Pneumonia." *Journal Royal Army Medical Corps*, November, 1926.
- LESCHER, F. GRAHAM, M.C., M.D. "Prolonged Pyrexia with Latent or Easily Overlooked Physical Signs." *Practitioner*, November, 1926.
- LYSTER, R. A., M.D., B.Sc., D.P.H. "The Prevention of Mental Deficiency." *Medical Officer*, September 29th, 1926.
- MITCHELL, W. E. M., M.C., M.B., B.S., F.R.C.S. "Treatment of Distension Overflow of Urine." *Lancet*, November 13th, 1926.
- MOORE, R. FOSTER, O.B.E., F.R.C.S. "Significance of Retinal Hæmorrhages." *British Medical Journal*, December 11th, 1926.
- PINCH, A. E. HAYWARD, F.R.C.S. "Two Cases of Mikulicz's Disease Treated with Radium." *British Medical Journal*, October 2nd, 1926.

EXAMINATIONS, ETC.

UNIVERSITY OF OXFORD.

- Final Examination for the Degree of B.M., B.Ch., December, 1926.*
- Materia Medica.*—Kingsley, A. P.
- Forensic Medicine and Public Health.*—Bertie, L. W. H., Robertson, D. A.
- Medicine, Surgery and Midwifery.*—Harding, C. L., Robertson, D. A.

UNIVERSITY OF CAMBRIDGE.

- First Examination for Medical Degrees, December, 1926.*
- Part II. Mechanics.*—Jones, J. D. M.
- Part IV. Elementary Biology.*—Shields, J., Warren, C. B. M.
- Third Examination for Medical Degrees, Michaelmas, 1926.*
- Part I. Midwifery and Gynaecology.*—Fitzgerald, M. G., Laviers, C. J., Pearce, R., Slinger, L. A. P., Woodrow, C. E.
- Part II. Principles and Practice of Physic, Pathology and Pharmacology.*—Barnsley, A., Elliott, H. M., Griffiths, T. L., Johnson, A. J., Mackenzie, A. V., Milner, J. G., Roles, F. C., Shields, D. G., Walker, F. H. A.

UNIVERSITY OF LONDON.

- First Examination for Medical Degrees, December, 1926.*
- Pass List.*—Chester-Williams, T. L., Crabb, D. R., Ellis, G. H., *††Harris, C. H. S., Hiscock, L. A., Lloyd, M. A., Macfarlane, R. G., Smith, D. A., Staunton, H. W. G.
- *Awarded a mark of Distinction in Inorganic Chemistry.
- † " " " Physics.
- ‡ " " " Biology.
- Third (M.B., B.S.) Examination for Medical Degrees, November, 1926.*
- Pass.*—Beagley, J. R., Cruden, S. S., Fairbairn, D. C., Fishman, M., Gaisford, W. F., Greenfield, C. R. M., Hosford, B. B., Hubble, D. V., Loveday, G. K., Nelken, G. J. V., Oldershaw, H. L., Pearsons, C. E., Smith, A. J., Durden, Thomas, D. E., White, E. A.
- Supplementary Pass List. Group II.*—Brigg, D. A., Hiscocks, H. F., Holmes, L., Payne, R. T., Whitton, J. S.

CHANGES OF ADDRESS.

- BRAIMBRIDGE, C. V., Summerleigh, Hornsea, East Yorks.
- BURNE, T. W. H., Kuala Lumpur, Federated Malay States.
- CHALK, C. L., "Esthwaite," Harlow, Essex.
- LOUGHBOROUGH, G. T., 9, Bentinck Street, W. 1 (Tel. Langham 1393).
and 1, Ashley Gardens, S.W. 1 (Tel. Victoria 3246).
- LOVEDAY, G. K., 130, Joubert Street, Pretoria, South Africa.
- TYSON, E., 44, London Road, Royston, Herts.

APPOINTMENTS.

- FORD, J. N. C., B.M., B.Ch.(Oxon.), appointed House Physician to the Victoria Hospital for Sick Children, Tite Street, S.W. 3.
- GREEN, R., M.R.C.S., L.R.C.P., appointed House Physician to the Royal Berkshire Hospital, Reading.
- HUBBLE, D. V., M.B., B.S.(Lond.), appointed Resident Medical Officer to the London Clinic, Ranelagh Road, Victoria, S.W.
- LLOYD, ERIC I., M.B., B.Ch.(Cantab.), F.R.C.S., appointed Surgeon to the Hospital for Sick Children, Great Ormond Street.
- ROLES, F. C., B.Ch.(Cantab.), M.R.C.S., L.R.C.P., appointed a House Physician to the Brompton Hospital for Consumption, Chelsea.
- SIMPSON, D. P., M.R.C.S., L.R.C.P., appointed Casualty House Surgeon to the Children's Hospital, Birmingham.

BIRTHS.

- ARTHUR.—On November 29th, 1926, at The Lady Willingdon Nursing Home, Madras, to Violet, wife of Dr. G. Kilpatrick Arthur—the gift of a son (Bruce).
- POMFRET KILNER.—On January 2nd, 1927, to Florence Mary, wife of T. Pomfret Kilner, F.R.C.S., of Rostherne, Sheldon Avenue, N. 6—a son.

MARRIAGES.

- CLIFFORD—JONES.—On January 11th, at St. Anselm's and St. Cecilia's Church, Kingsway, London, by the Rev. Fr. Arbuthnot, Reginald Charles Clifford, Major, I.M.S., to Anne Frederica Jones.
- FRANCE—MACCOUN.—On December 30th, at All Souls Church, Hampstead, by the Rev. S. N. L. Ford, Francis George France, M.B., only son of the late George France, of Ludlow, and Mrs. France, of 24, Marlborough Hill, St. John's Wood, to Eileen Ritchie, only daughter of the late James Ritchie Maccoun, of the Middle Temple, and Mrs. Maccoun, of 112, Clifton Hill, St. John's Wood.
- LOUGHBOROUGH—MATHER.—On January 12th, at the Savoy Chapel, Dr. G. Trevor Loughborough, of 9, Bentinck Street, W. 1, to Mrs. Betty Vanstone Mather, of 1, Ashley Gardens, S.W. 1.
- NELSON—SULLIVAN.—On January 22nd, at St. James's Church, Piccadilly, London, by Canon Welch, Henry Philbrick Nelson, B.Ch. (Cantab.), M.R.C.S., L.R.C.P., second son of Mr. and Mrs. George Nelson, of Hawke's Bay, New Zealand, to Kathleen, elder daughter of Mr. and Mrs. Alan Sullivan, of Pluckley, Kent, and granddaughter of Bishop Sullivan, of Canada.
- PAYNE—ABBOTT.—On December 29th, at St. Nicholas' Church, Islip, Northants, by the Rev. Canon Fry, Reginald T. Payne, F.R.C.S., eldest son of Mr. and Mrs. James Payne, of The Crest, Queen's Park Parade, Northampton, to Isabella Margaret, daughter of Mr. G. E. Abbott, J.P., O.B.E., and Mrs. Abbott, of Clanfield, Islip, Thrapston.

DEATHS.

- GROSVENOR.—On January 8th, 1927, at Bury Vicarage, Sussex (the residence of his brother-in-law, the Rev. H. E. Emmet), Wilshaw William Grosvenor, M.D., late of Gloucester, eldest son of William and Elizabeth Grosvenor, of 9, Greville Place, London.
- PHILLIPS.—On New Year's Day, 1927, at his residence in Kasr-el-Doubara, peacefully, after a long illness, Llewellyn C. Powell Phillips, M.A.(Cantab.), M.D., F.R.C.S., F.R.C.P., only son of the late James Mathias Phillips, M.D., of Cardigan, aged 55.
- SHAW.—On January 14th, 1927, after a short illness, Thomas Clave Shaw, M.D., F.R.C.P., of Claremont Lodge, Cheltenham, and 29, Queen Anne Street, London.
- STANDAGE.—On January 16th, 1927, suddenly, in London, Robert Frazer Standage, C.I.E., Lt.-Col., late I.M.S.

NOTICE.

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